

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M. G.		12/30/99
O.I.P.E. CLASSIFIER		21	1/11/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		64874	2-2

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	2/16/00
2	2/16/00
3	2/16/00
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Claim	Date
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If more than 150 claims or 10 actions  
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